

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

BRAD JOSEPH ET AL. ✓

Serial No.: Unknown

10/737,409

Filed: December 16, 2003

For: **METHOD AND SYSTEM FOR AUTOMATING OCCUPATIONAL
HEALTH AND SAFETY INFORMATION MANAGEMENT**

Attorney Docket No.: FMC 1529 PUS / 201-1421 ✓

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Commissioner for Patents
U.S. Patent & Trademark Office
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In compliance with the duty of disclosure under 37 C.F.R. § 1.56 and § 1.97-1.98, the references listed and identified on the attached Form PTO/SB08B is being submitted herewith for consideration by the Examiner.

While this Statement is being filed in compliance with the duty of disclosure, citation of the attached reference is not to be construed as an admission that any of the reference(s) are "material" as defined under 37 C.F.R. § 1.56(b).

If the filing date of this application is on or before June 30, 2003, a copy of each reference listed on the attached Form PTO/SB08B is included herewith. If this application was filed after June 30, 2003, copies of any cited U.S. patent/application references have not been included. Consideration and entry into the record of these references is respectfully requested.

Respectfully submitted,

BRAD JOSEPH ET AL.

Date: 3-9-04

By: John S. Le Roy

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Attorney/Agent for Applicants

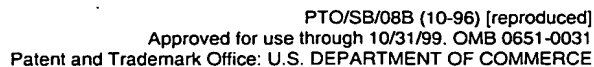
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INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(use as many sheets as necessary)

Complete if Known

Application Number	UNKNOWN
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Filing Date	December 16, 2003
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First Named Inventor	Brad Joseph et al.
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Group Art Unit	UNKNOWN
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Examiner Name	UNKNOWN
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Sheet	1	of	1	Attorney Docket Number	FMC 1529 PUS / 201-1421
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OTHER PRIOR ART -- NON PATENT LITERATURE DOCUMENTS

**Examiner
Signature**

**Date
Considered**

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹Unique citation designation number. ²Applicant is to place a check mark here if English language Translation is attached.